MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 09/554465 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				IND	DEP	IND	DEP	IND	DEP
	IND	DEP	IND	DEP	IND	DEP								
1	/						51							
2		/					52							
3		/					53							
4		/					54							
5		/					55							
6		/					56							
7		/					57							
8		/					58							
9		/					59							
10		/					60							
11		/					61							
12		/					62							
13		/					63							
14		/					64							
15		/					65							
16		/					66							
17		\					67							
18		I					68							
19		I					69							
20		/					70							
21		i					71							
22		/					72							
23		/					73							
24		/					74							
25		I					75							
26		/					76							
27		I					77							
28		/					78							
29		//					79							
30		/					80							
31		/					81							
32		/					82							
33		/					83							
34							84							
35							85							
36							86							
37							87							
38							88							
39							89							
40							90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.							TOTAL IND.							
TOTAL DEP.	1	32					TOTAL DEP.							
TOTAL CLAIMS	33						TOTAL CLAIMS							